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ABSTRACT

This learning activity package on observation of the patient is one of a series of 12 titles developed for use in health occupations education programs. Materials in the package include objectives, a list of materials needed, a list of definitions, information sheets, reviews (self evaluations) of portions of the content, and answers to reviews. These topics are covered: patient observation, using various senses to observe, subjective and objective symptoms, medical terms to use, symptoms to observe on various body parts, and reporting observations. (YLB)

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ED220702

LAP *Learning Activity Package*

OBSERVATION OF PATIENT

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CE 033 798

OBSERVATION OF PATIENT

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OBSERVATION OF PATIENT
OBJECTIVES

UPON COMPLETION OF THIS LAP, THE STUDENT WILL BE ABLE TO:

1. EXPLAIN THE IMPORTANCE OF OBSERVATION.

2. LIST TWO (2) WAYS YOU CAN OBSERVE A PATIENT.

3. LIST FOUR (4) EXAMPLES OF HOW OBSERVATIONS CAN BE OBTAINED.

4. EXPLAIN THE DIFFERENCE BETWEEN OBJECTIVE AND SUBJECTIVE SYMPTOMS.

5. DEFINE THE FOLLOWING TERMS THAT ARE PERTINENT TO REPORTING OBSERVATIONS:

   A) ABRASIONS
   B) CLAMMY
   C) CYANOTIC
   D) EDEMA
   E) FATIGUE
   F) FLUSHED
   G) INCOHERENT
   H) JAUNDICE
   I) LESIONS
   J) LETHARGIC
   K) ORIENTED
   L) PALLOR
   M) SYNCOPE
   N) VERTIGO

6. LIST TWO (2) COMMON ABNORMAL OBSERVATIONS FOUND ON EACH OF THE FOLLOWING AREAS:

   A) HEAD AND FACE
   B) THROAT
   C) CHEST
   D) ABDOMEN
   E) EXTREMITIES

7. LIST TWO (2) OBSERVATIONS WHICH WOULD INDICATE THE PATIENT'S MENTAL STATE.

8. IDENTIFY THE PERSON TO WHOM OBSERVATIONS ARE TO BE REPORTED.

9. EXPLAIN WHY IT IS IMPORTANT TO REPORT OBSERVATIONS.

MATERIALS NEEDED:

1. WORK SHEET*
2. PEN OR PENCIL.

* BEFORE BEGINNING THE LAP, PICK UP THE WORK SHEET FROM THE INSTRUCTOR.

DEFINITION

OBSERVATIONS BY WORKERS IN THE MEDICAL FIELD MAY HELP THE DOCTOR AND THE OUTCOME OF THE PATIENT. PERSONS COMING IN CONTACT WITH THE PATIENTS CAN CONTRIBUTE BY BEING ALERT AND OBSERVANT TO THE SIGNS AND SYMPTOMS OF ILLNESS, DISEASE, OR ANXIETY. YOU CAN PLAY AN IMPORTANT ROLE ON THE MEDICAL TEAM BY BEING ALERT TO CHANGES IN THE PATIENT'S CONDITION.

OBSERVATION IS LEARNED. IT IS NOT DIFFICULT, BUT IT TAKES PRACTICE BY MAKING THE OBSERVER MORE AWARE. PERTINENT OBSERVATIONS COULD INDICATE THAT THE PATIENT NEEDS OTHER SOURCES OF PROFESSIONAL HELP, SUCH AS A SOCIAL WORKER, CLERGY, PHYSICAL THERAPIST, OR FAMILY COUNSELOR.

OBSERVATION CAN BE A QUICK NOTICE OF THE PATIENT OR A MORE DETAILED OBSERVATION. BUT EACH TIME YOU LOOK AT A PATIENT, YOU MUST DEVELOP THE AWARENESS TO NOTICE ANYTHING DIFFERENT ABOUT HIM OR HER, SO THAT HIS OR HER CARE CAN BE MORE INDIVIDUALIZED. YOU WILL BE DEVELOPING "DETECTIVE" TECHNIQUES OR CLUES TO THE PATIENT'S CONDITION OR WELL-BEING.

OBSERVATION OF PATIENT
REVIEW #I

DO YOU REMEMBER?

1. WHO CAN MAKE OBSERVATIONS?
2. HOW DO WE DEVELOP OBSERVATION SKILLS?
3. WHAT OTHER SOURCES OF HELP MIGHT THE PATIENT NEED?
4. LIST TWO (2) WAYS YOU CAN OBSERVE A PATIENT.
5. WHEN DO WE OBSERVE PATIENTS?
6. ARE YOU "OBSERVANT"?

ANSWERS ARE ON PAGE 5.

IF YOU GOT THEM ALL RIGHT,
CONTINUE ON.

IF NOT, GO BACK AND REVIEW.

REVIEW I. ANSWER KEY:

1. ANYONE, ESPECIALLY YOU!!!!

2. LEARNED, BY PRACTICE, AND BECOMING MORE AWARE

3. SOCIAL WORKER, CLERGY, PHYSICAL THERAPIST, OR FAMILY COUNSELOR

4. QUICK NOTICE AND DETAILED

5. ALL THE TIME

6. IF YES, GOOD FOR YOU. IF NO, WORK TO IMPROVE YOUR SKILLS.

7. A STAR FOR YOU

"YOU'VE SEEN IT, BUT DID IT REALLY SINK IN?" OR "HOW AWARE ARE YOU?"

HERE IS A GOOD OPPORTUNITY TO CHECK OUT YOUR POWERS OF OBSERVATION. DO YOU NOTICE EVERY LITTLE DETAIL, OR DO THINGS SLIP RIGHT PAST YOU? DO YOU TAKE NOTICE, OR ARE YOU UNOBSERVANT? FIND OUT WITH THIS LITTLE QUIZ. IT CONCERNS THINGS YOU SEE EVERY DAY. THE ANSWERS ARE ON THE NEXT PAGE.

1. YOU PROBABLY KNOW IT IS RED WITH WHITE LETTERS, BUT HAVE YOU NOTICED THE SHAPE OF A STOP SIGN?
2. WHICH WAY DOES ABE LINCOLN FACE ON A PENNY?
3. IN WHICH HAND DOES THE STATUE OF LIBERTY HOLD HER TORCH?
4. WHAT IS THE HIGHEST NUMBER ON AN AM RADIO DIAL?
5. HOW MANY TINES ARE THERE ON A DINNER FORK?
6. WHICH 2 LETTERS DO NOT APPEAR ON A STANDARD TELEPHONE DIAL?
7. MOST U.S. POSTAGE STAMPS GIVE THEIR DENOMINATION WITH A NUMBER PLUS (A) THE WORD "CENTS"; (B) THE SIGN ¢; OR (C) THE LETTER "C."
8. ON THE BACK OF A $5.00 BILL IS THE LINCOLN MEMORIAL; ON A $10.00 BILL IT IS THE U.S. TREASURY BUILDING; ON A $20.00 BILL IS THE WHITE HOUSE. WHAT IS IN THE CENTER OF THE FLIP SIDE OF A $1.00 BILL?
9. DOES IT SAY "COCA-COLA" ON EVERY CAN?
10. WHICH OF THESE ARE FOUND ON ALL CURRENT U.S. COINS? (A) "UNITED STATES OF AMERICA"; (B) "E PLURIBUS UNUM"; (C) "IN GOD WE TRUST"; (D) "LIBERTY."
11. WHEN YOU WALK NORMALLY, DO YOUR ARMS SWING WITH OR AGAINST THE RHYTHM OF YOUR LEGS?

ANSWERS TO "YOU'VE SEEN IT, BUT DID IT REALLY SINK IN?"

1. OCTAGONAL

2. HE IS LOOKING LEFT, WHICH MEANS THAT TO US HIS NOSE POINTS TO THE RIGHT.

3. IN THE RIGHT

4. THE HIGHEST IS 1600.

5. STANDARD IS FOUR.

6. Q AND Z

7. "C"

8. NO PICTURE, JUST THE WORD 'ONE' DISPLAYED IN LARGE LETTERS.

9. YES

10. ALL FOUR

11. AGAINST. WHEN YOUR LEGS GO "LEFT-RIGHT, LEFT-RIGHT," YOUR ARMS GO "RIGHT-LEFT, RIGHT-LEFT."

OBSERVATION
WAYS TO OBSERVE

WE USE MANY WAYS TO OBSERVE.

WE USE OUR EYES TO SEE.

WE USE OUR NOSE TO SMELL.

WE USE OUR FINGERS TO FEEL.

WE USE OUR EARS TO HEAR.

EXAMPLES:

EYES CAN BE USED TO SEE:

COLOR OF SKIN, NERVOUSNESS, SWEATING, SWELLING, ANXIETY, BLEEDING, AND LEVEL OF CONSCIOUSNESS

NOSES CAN BE USED FOR SMELLING:

BODY ODORS, BAD BREATH, BLEEDING, ALCOHOL BREATH, CIGARETTES, AND UNCLEAN BODIES

FINGERS CAN BE USED FOR FEELING:

FEVER, SWOLLEN AREAS, COLD SKIN, BUMPS AND ABRASIONS, GROWTHS AND TUMORS, AND HOT AREAS

EARS CAN BE USED FOR HEARING:

DIFFICULT BREATHING, CHOKING, HEART BEATS, CRACKING OF BONES, AND STOMACH ACTIVITY

LISTENING TO WHAT PATIENTS ARE SAYING IS A VERY IMPORTANT ASPECT OF HEARING. LISTENING TO THEIR COMPLAINTS OR CONVERSATION MAY GIVE YOU ONE OF YOUR BIGGEST "CLUES."

REVIEW #II

DO YOU REMEMBER?

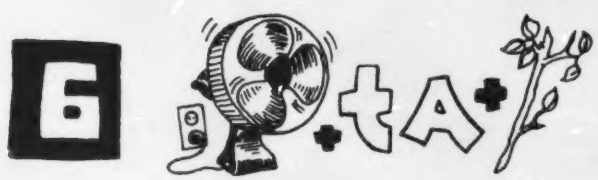
1. LIST FOUR (4) EXAMPLES OF HOW OBSERVATIONS CAN BE OBTAINED.

2. GIVE TWO (2) EXAMPLES OF OBSERVATIONS YOU CAN SEE.

3. LIST THREE (3) EXAMPLES OF ODORS YOU CAN SMELL.

4. DESCRIBE FOUR (4) DIFFERENT THINGS YOU CAN FEEL ON THE PATIENT'S BODY.

5. EARS CAN HEAR TWO (2) TYPES OF HEARING IN OBSERVATION. WHAT ARE THEY? GIVE EXAMPLES OF EACH.



ANSWERS ON NEXT PAGE

IF YOU GOT THEM ALL RIGHT, CONTINUE ON.

IF NOT, GO BACK AND REVIEW.

REVIEW #II. ANSWER KEY:

1. EYES, NOSE, FINGERS, AND EARS

2. COLOR, SWEATING, SWELLING, ANXIETY, NERVOUSNESS, BLEEDING, OR LEVEL OF CONSCIOUSNESS

3. BODY ODORS, BAD BREATH, BLEEDING, ALCOHOL BREATH, CIGARETTES, OR UNCLEAN BODIES

4. FEVER, SWOLLEN AREAS, COLD SKIN, BUMPS AND ABRASIONS, GROWTHS AND TUMORS, OR HOT AREAS.

5. A) BODY SOUNDS; FOR EXAMPLE, DIFFICULT BREATHING, CHOKING, HEART BEATS, CRACKING OF BONES, OR STOMACH ACTIVITY

   B) LISTENING TO WHAT THE PATIENT SAYS; FOR EXAMPLE, "I HAVE A HEADACHE."

6. FANTASTIC

THERE ARE TWO DIFFERENT KINDS OF SYMPTOMS WHICH MAY BE OBSERVED.

1 ONE IS SUBJECTIVE. THESE ARE SIGNS AND SYMPTOMS ONLY FELT AND EXPERIENCED BY THE PATIENT.

EXAMPLES.....

PAIN

NAUSEA

DIZZINESS

2 ANOTHER IS OBJECTIVE. THESE ARE OBSERVED BY OTHERS.

EXAMPLES.....

BLEEDING

SWEATING

WOUNDS

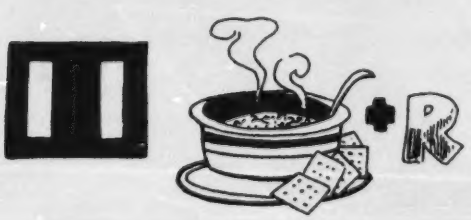
SKIN COLOR

OBSERVATION
REVIEW #III

DO YOU REMEMBER?

PLACE AN "S" IN FRONT OF THE FOLLOWING SENTENCES THAT GIVE EXAMPLES OF SUBJECTIVE SYMPTOMS AND AN "O" IN FRONT OF OBJECTIVE SYMPTOMS.

1. MR. BROWN STATES THAT HE HAS A TOOTHACHE.
2. MRS. WILLIAMS'S URINE APPEARS TO HAVE BLOOD IN IT.
3. MRS. SMITH'S RESPIRATIONS ARE VERY RAPID.
4. MR. LEE STATES THAT HE IS NAUSEATED AFTER EATING.
5. MRS. BENDER'S DRESSING IS DRY AND INTACT.
6. MRS. CAMPBELL COMPLAINS OF DIZZINESS AFTER EACH RESPIRATORY TREATMENT.
7. MS. STARK IS JAUNDICED TODAY.
8. MR. RUNGE HAS EXCESSIVE BLEEDING EVERY TIME HE HAS A TOOTH EXTRACTED.
9. MS. HIME IS PERSPIRING, AND HER SKIN IS COLD AND CLAMMY.
10. MR. RUE IS EXPERIENCING SOME WHEEZING WITH EACH BREATH.



ANSWERS ON THE NEXT PAGE

IF YOU GOT THEM ALL RIGHT, CONTINUE ON.

IF NOT, REVIEW.

REVIEW #III. ANSWER KEY:

1. S
2. O
3. O
4. S
5. O
6. S
7. O
8. O
9. O
10. O
11. SUPER

THERE ARE SOME SPECIAL MEDICAL TERMS THAT HEALTH WORKERS SHOULD USE IN DESCRIBING THEIR OBSERVATIONS. A FEW ARE LISTED BELOW. TRY TO REMEMBER THESE WHEN DOING YOUR REPORTING.

ABRASIONS....SKIN HAS SCRAPED AREAS

CLAMMY.....SKIN COOL AND MOIST

CYANOTIC....SKIN COLOR BLUISH, ESPECIALLY LIPS AND NAILS

EDEMA....SWELLING OF BODY PART, USUALLY EXTREMITIES

FATIGUE....TIRED FEELING

FLUSHED....REDDISH COLOR TO SKIN, USUALLY FACE

INCOHERENT....UNAWARE OF SURROUNDINGS, SOME BABBLING AND RAMBLING IN SPEECH

JAUNDICE....YELLOWISH COLOR TO SKIN AND WHITES OF EYES

LESIONS....SORES ON SKIN

LETHARGIC....HAS THE "BLAHS," SLEEPY, LACKS ENERGY

ORIENTED....KNOWS TIME AND PLACE, WHERE AND WHAT

PALLOR....PALE ALMOST WHITE COLOR TO SKIN, USUALLY DISTINCTIVE IN FACE

SYNCOPE....FAINTING

VERTIGO....DIZZINESS

REVIEW #IV

DO YOU REMEMBER?

MATCH THE FOLLOWING.

1. ____	INCOHERENT	A.	FAINTING
2. ____	FLUSHED	B.	DIZZINESS
3. ____	VERTIGO	C.	PALE COLOR TO SKIN
4. ____	ABRASIONS	D.	KNOW TIME AND PLACE
5. ____	EDEMA	E.	HAS THE "BLAHS," SLEEPY, NO ENERGY
6. ____	CLAMMY	F.	SORES ON SKIN
7. ____	JAUNDICED	G.	YELLOWISH COLOR TO SKIN
8. ____	LESIONS	H.	UNAWARE OF SURROUNDINGS
9. ____	LETHARGIC	I.	REDDISH COLOR TO SKIN
10. ____	SYNCOPE	J.	SWELLING OF BODY PART
11. ____	CYANOTIC	K.	BLUISH COLOR TO SKIN
12. ____	ORIENTED	L.	SKIN COOL AND MOIST
13. ____	PALLOR	M.	SKIN HAS SCRAPED AREAS
14. ____	FATIGUE	N.	TIRED FEELING

ANSWERS ON NEXT PAGE

IF YOU GOT THEM ALL RIGHT...CONTINUE ON. IF NOT, GO BACK AND REVIEW.

REVIEW #IV. ANSWER SHEET

1. H
2. I
3. B
4. M
5. J
6. L
7. G
8. F
9. E
10. A
11. K
12. D
13. C
14. N
15. HURRAY FOR YOU!

IN MAKING OBSERVATIONS, IT IS GENERALLY MORE CONVENIENT AND MOST EFFICIENT TO START AT THE PATIENT'S HEAD. A QUICK ASSESSMENT FROM THE HEAD TO THE TOES IS A SKILL THAT EVERY HEALTH WORKER SHOULD PRACTICE.

TOP

BOTTOM

HEAD AND FACE

COLORS SUCH AS CYANOSIS, JAUNDICE, PALLOR, FLUSHED

SWELLING AND ABRASIONS

DARK CIRCLES UNDER EYES, PUFFINESS, REDNESS, AND TWITCHING

BREATHING DIFFICULTIES AND NOSE ABNORMALITY

PALE, CYANOTIC, OR CRACKED LIPS

UNUSUAL ODOR TO BREATH

TEETH AND GUMS WITH OBVIOUS INFECTION AND OR DECAY (DISCOLORATION OF TEETH)

ABSENCE OF TEETH

FACIAL EXPRESSION (GIVES US "CLUES" TO MENTAL SYMPTOMS [SUBJECTIVE] LIKE FEAR, WORRY, PAIN, AND FATIGUE)

THROAT

HOARSENESS, DIFFICULTY IN SWALLOWING OR SPEAKING

NECK IF IT IS RESTRICTIVE IN MOVEMENT OR ENLARGED

CHEST

EXCESSIVE COUGHING, "SPITTING" UP, ABNORMAL OR NOISY BREATHING

ABNORMAL SHAPE TO THE CHEST AREA

ABDOMEN

OVERSIZED OR VERY LARGE (PROTRUDING) ABDOMEN

EXTREMITIES

TREMBLING, CYANOSIS, OR SWELLING OF HANDS, FEET, OR FINGERS. BRITTLE NAILS OR NAILS THAT ARE UNUSUAL IN APPEARANCE. (NAIL BITING INDICATES A SOURCE OF NERVOUSNESS.)

MENTAL STATE

DOES THE PATIENT UNDERSTAND INSTRUCTIONS?

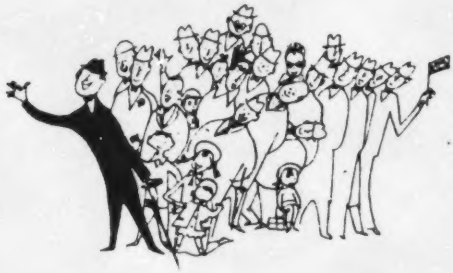
IS THE PATIENT ORIENTED TO TIME AND PLACE?

DOES HE OR SHE APPEAR CONFUSED?

IS THE PATIENT INCOHERENT? IS HE OR SHE SPEAKING IN INCOMPLETE SENTENCES?

IS THE PATIENT DEPRESSED?

DOES THE PATIENT DISPLAY APPROPRIATE BEHAVIOR FOR THE SETTING HE OR SHE IS IN?



OBSERVATION

REVIEW #V

DO YOU REMEMBER?

1. HOW OFTEN DO YOU OBSERVE THE PATIENT?
2. IN WHAT ORDER IS IT MOST CONVENIENT TO OBSERVE THE PATIENT?
3. LIST FIVE SYMPTOMS THAT CAN BE OBSERVED ON THE PATIENT'S HEAD AND FACE.
4. WHAT ARE SOME OBSERVATIONS TO MAKE ABOUT THE NECK?
5. LIST THREE SYMPTOMS THAT CAN BE OBSERVED ON THE PATIENT'S NECK.
6. WHAT DOES 'PROTRUDING ABDOMEN' MEAN?
7. LIST FOUR SYMPTOMS THAT CAN BE OBSERVED ON THE PATIENT'S EXTREMITIES.
8. LIST SIX SYMPTOMS THAT MAY SHOW THE MENTAL STATUS OF A PERSON.

ANSWERS ON NEXT PAGE

IF YOU GOT THEM ALL RIGHT...

CONTINUE ON...

IF NOT, GO BACK AND REVIEW.

REVIEW #V. ANSWER KEY

1. EVERY TIME YOU SEE THEM

2. HEAD TO TOE

3. COLORS LIKE CYANOSIS, JAUNDICE, PALENESS, FLUSHED; SWELLING, ABRASIONS; EYE PROBLEMS; BREATHING; NOSE DIFFICULTIES; LIP DISCOLORATION; UNUSUAL ODOR TO BREATH; TEETH AND GUM PROBLEMS; OR FACIAL EXPRESSIONS FOR PAIN, FEAR, WORRY, FATIGUE

4. HOARSENESS, DIFFICULTY IN SWALLOWING OR SPEAKING, SWOLLEN NECK

5. COUGHING, SPITTING UP, ABNORMAL BREATHING, OR SHAPE OF CHEST

6. OVERSIZED OR EXTRA LARGE

7. TREMBLING, CYANOSIS, SWELLING, ABNORMAL NAILS

8. UNDERSTANDING INSTRUCTIONS, ORIENTED, CONFUSED, INCOHERENT, DEPRESSED, OR APPROPRIATE BEHAVIOR

9. GREAT!

ALL UNUSUAL/ABNORMAL OBSERVATIONS MUST BE REPORTED IMMEDIATELY (*STAT)!!!!!

EACH HEALTH TEAM MEMBER IS RESPONSIBLE FOR REPORTING TO DIFFERENT PEOPLE. IT IS YOUR RESPONSIBILITY TO FIND OUT TO WHOM YOU SHOULD REPORT YOUR OBSERVATIONS. SOME EXAMPLES ARE THE FOLLOWING:

NURSE ASSISTANT.....TEAM LEADER OR CHARGE NURSE

DENTAL ASSISTANT.....DENTIST

MEDICAL ASSISTANT.....DOCTOR OR CHARGE OFFICE NURSE

HOSPITAL HEALTH SERVICES....IMMEDIATE SUPERVISOR OR DEPARTMENT CHARGE PERSON

*STAT = IMMEDIATELY.

OBSERVATION

Review #VI

DO YOU REMEMBER?

1. When must unusual/abnormal observations be reported?

2. To whom are you responsible?

ANSWERS ARE ON NEXT PAGE.

If you got them all right... continue on.

If not, go back and review.

REVIEW # VI. ANSWER KEY

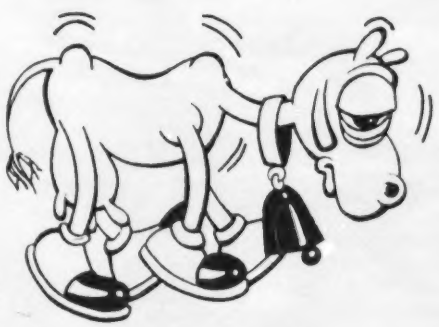
1. UNUSUAL/ABNORMAL OBSERVATIONS MUST BE REPORTED IMMEDIATELY.

2. YOU ARE RESPONSIBLE TO YOUR IMMEDIATE SUPERVISOR; E.G., A NURSE ASSISTANT REPORTS TO THE TEAM LEADER OR CHARGE NURSE.

3. NICE GOING.

KNOWLEDGE OF HOW A PATIENT IS REACTING TO A GIVEN SITUATION MAY ASSIST THE DOCTOR(S) IN THE PATIENT'S TREATMENT. FOR EXAMPLE, THE PATIENT MAY SHOW SIGNS OF EXTREME NERVOUSNESS. UPON RECEIVING THIS INFORMATION, THE DOCTOR COULD ORDER A MEDICATION TO RELAX THE PATIENT AND EASE THE NERVOUSNESS.

THE PATIENT MAY BE EXPERIENCING A PRESHOCK CONDITION WHICH, IF REPORTED IMMEDIATELY, COULD BE TREATED QUICKLY.



THE PATIENT COULD HAVE A DISEASE OR PREDISEASE CONDITION THAT THE DOCTOR IS UNAWARE OF AND, IF REPORTED, TREATMENT FOR THE CONDITION COULD BE GIVEN.

OBSERVATION

REVIEW #VII

DO YOU REMEMBER?

1. WHY IS REPORTING OBSERVATIONS IMPORTANT?

2. LIST THREE SITUATIONS WHEN QUICK REPORTING OF OBSERVATIONS WOULD BE HELPFUL.

ANSWERS ON NEXT PAGE

IF YOU GOT THEM ALL RIGHT...CONTINUE ON.

IF NOT, GO BACK AND REVIEW.

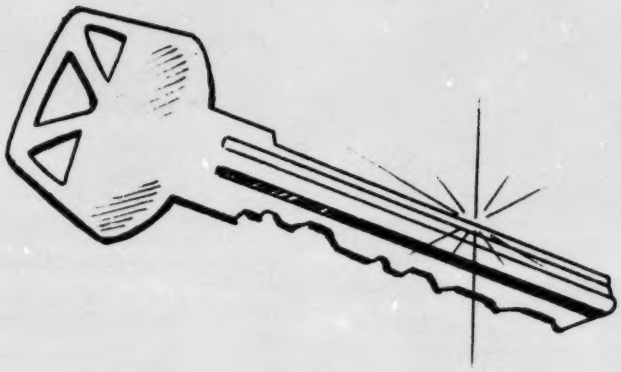
REVIEW #VII. ANSWER KEY

1. REPORTING OBSERVATIONS ASSISTS THE DOCTOR IN THE TREATMENT AND IMPROVES THE PATIENT'S WELL-BEING.

2. MAKE UP SITUATIONS AND DISCUSS WITH INSTRUCTOR.

3. REALLY NICE

THE



TO OBSERVATION IS AWARENESS.

PASS IN THIS LAP TO YOUR TEACHER WITH YOUR COMPLETED WORK SHEET, AND PICK UP THE FINAL REVIEW FOR OBSERVATION.

HAVE A ☺ HAPPY DAY!

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This learning activity package is one of a series of 12 titles relating to health careers that are available from the California State Department of Education. A student packet and an instructor's packet are published in each of the following subjects:

Blood Pressure
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